SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:						:	9	OF		14
(0	che	ck only	one)								
	X	11a		11b		11c		12			
		13		14		15		16			17

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF IN	TERVENTIONAL PAIN PHYSICIAN	N PAC					
Full Name (Last, First, Middle Initial) Chandrakala Manchikanti Mailing Address 2075 Natchez Lane	Date of Receipt						
City Paducah	State Zip Code KY 42001	02 14 2012 Transaction ID : SA11AI.10051 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	5000.00					
Name of Employer KSA Enterprises, Inc.	Occupation Executive	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00						
Full Name (Last, First, Middle Initial) Laxmaiah Manchikanti MD Mailing Address 2075 Natchez Lane	Laxmaiah Manchikanti MD						
City Paducah	State Zip Code KY 42001	7 Transaction ID : SA11AI.10052 Amount of Each Receipt this Period 5000.00					
FEC ID number of contributing federal political committee.	C						
Name of Employer PMCP PSC	Occupation Medical Director	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00						
Full Name (Last, First, Middle Initial) W. Stephen Minore MD							
Mailing Address 2202 Harlem Rd.	Mailing Address 2202 Harlem Rd.						
City Loves Park	State Zip Code IL 61111	Transaction ID : SA11AI.10059 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	5000.00					
Name of Employer Rockford Anest. Assoc.	Occupation Physician	Contribution					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00						
SUBTOTAL of Receipts This Page (optional)		15000.00					
TOTAL This Period (last page this line numb	er only)						